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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted With Initial Filing
OR
☒ Declaration
Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	1700.119
First Named Inventor	Collins, et al.
COMPLETE IF KNOWN	
Application Number	10/064,623
Filing Date	07/31/2002
Group Art Unit	3742
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method and apparatus for continuous flow microwave-assisted chemistry techniques

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **07/31/2002** as United States Application Number or PCT International

Application Number **10/064,623** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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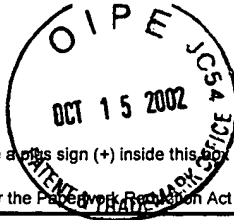
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label		OR	<input type="checkbox"/> Correspondance address below
Name		21176			
Address		PATENT & TRADEMARK OFFICE			
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City		State	ZIP		
Country	Telephone		Fax		
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Michael John		Family Name COLLINS or Surname			
Inventor's Signature <i>Michael John Collins</i>		Date <i>Sept. 16, 2002</i>			
Residence: City Charlotte	State NC	Country USA	Citizenship USA		
Mailing Address 10225 Thomas Payne Road					
Mailing Address					
City Charlotte	State North Carolina	ZIP 28277	Country USA		
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Michael John		Family Name COLLINS, JR. or Surname			
Inventor's Signature <i>Michael John Collins, Jr.</i>	Date <i>Sept. 16, 2002</i>				
Residence: City Charlotte	State NC	Country USA	Citizenship USA		
Mailing Address 10225 Thomas Payne Circle					
Mailing Address					
City Charlotte	State NC	ZIP 28277	Country USA		
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Wyatt Price		HARGETT, JR.	
Inventor's Signature <i>Wyatt Price Hargett</i>		Date <i>Sept. 16, 2002</i>	
Residence: City	Matthews	State	NC
Country	USA	Citizenship	USA
Mailing Address 3201 Pleasant Plains Road			
Mailing Address			
City	Matthews	State	North Carolina
ZIP	28105	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Edward Earl		KING	
Inventor's Signature <i>Edward Earl King</i>		Date <i>Sept. 16, 2002</i>	
Residence: City	Charlotte	State	NC
Country	USA	Citizenship	USA
Mailing Address 4709 Pineland Place			
Mailing Address			
City	Charlotte	State	North Carolina
Zip	28277	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Gary Wilbert		BUSSE	
Inventor's Signature <i>Gary Wilbert Busse</i>		Date <i>Sept. 16, 2002</i>	
Residence: City	Monroe	State	NC
Country	USA	Citizenship	USA
Mailing Address 2309 Raccoon Run			
Mailing Address			
City	Monroe	State	NC
Zip	28112	Country	USA

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